(Date)

(Revised 1/3/11)

# Employee Post-Travel Disclosure of Travel Expenses

Dapper Digital Stromp SENATE SECRETARY OF THE SENATE PUBLIC RECORDS
2018 APR -9 PM 2:58

Post-Travel Filing Instructions: Complete this form within 30 days of returning from travel. Submit all forms to the Office of Public Records in 232 Hart Building.

In compliance with Rube reimbursed/paid for		<del>-</del>	sures with respect t	to travel expenses that have been or wi
<u> </u>		rization (Form RE-1), <u>I</u> rtification Form with all	<del>, ,,</del>	ary, invitee list, etc.)
Private Sponsor(s) (list	all): Healthcare In	formation and Mana	gement System	s Society (HIMSS)
Travel date(s): March	6-9, 2018			
Name of accompanying Relationship to Travele	g family member (if a	ny): N/A Child	•	
	OSTS IN EMPLOYEE	EASE DUE TO THE ACC EXPENSES. (Attach addit		USE OR DEPENDENT CHILD, ONLY ary.)
	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
☐ Good Faith Estimate	\$757.30	\$447	\$185	\$795 (govt rate; conference registration fee waived)
☑ Actual Amount				
Expenses for Accomp	anying Spouse or De	pendent Child (if applie	able):	
	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
☐ Good Faith Estimate				
☐ Actual Amount				
Provide a description necessary.):  See atta	of all meetings and evachment.	ents attended. See Senat	te Rule 35.2(c)(6).	(Attach additional pages if
04/09/18	Colin Go	UPinch.		
(Date)	(Printed r	name of traveler)		(Signature of traveler)
TO BE COMPLETED	BY SUPERVISING	MEMBER/OFFICER:		
		es set out above in connection, lodging, and related	d expenses as define	
. 1 1 -			Tatta	Marie

(Signature of Supervising Senator/Officer)

Form RE-2

## Colin Goldfinch – Attachment to Employee post-Travel Disclosure of Travel Expenses

HIMSS18 Annual Conference & Exhibition – March 6-9, 2018 – Las Vegas NV

## Tuesday, March 6, 2018

- Travel
- Congressional Affairs Panel
- HIMSS18 Exhibit Floor

## Wednesday, March 7, 2018

• HIMSS18 Exhibit Floor

## Thursday, March 8, 2018

- Meeting, HIMSS Clinical Business Intelligence Committee
- HIMSS18 Exhibit Floor

## Friday, March 9, 2018

Travel

(Revised 10/19/15)

## EMPLOYEE PRE-TRAVEL AUTHORIZATION

<u>Pre-Travel Filing Instructions</u>: Complete and submit this form at least 30 days prior to the travel departure date to the <u>Select Committee on Ethics</u> in <u>SH-220</u>. Incomplete and late travel submissions will <u>not</u> be considered or approved. This form <u>must</u> be typed and is available as a fillable PDF on the Committee's website at ethics.senate.gov. Retain a copy of your entire pre-travel submission for your required post-travel disclosure.

Date/Time Stamp		Date/Time	Stamp
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Form RE-1

ETHIC FEB 2'18PM 2:53

Name of Traveler:	Colin Goldfinch
Employing Office/Committee:	Health, Education, Labor, and Pensions
Private Sponsor(s) (list all): Healthcare	Information and Management Systems Society (HIMSS)
Travel date(s): March 6-March 9	o for any reason you <u>must</u> notify the Committee.
Destination(s): Las Vegas, NV	
	cted to the traveler's official or representational duties:
	onference on health information technology. As the minority staffer responsible for s conference presents an opportunity to speak with national leaders in that field and committee.
Name of accompanying family member (in Relationship to Employee: Spouse	
•	this form is true, complete and correct to the best of my knowledge:
<u>O2/02/2018</u> (Date)	(Signature of Employee)
TO BE COMPLETED BY SUPERVISING S Secretary for the Majority, Secretary for the M	ENATOR/OFFICER (President of the Senate, Secretary of the Senate, Sergeant at Arm finority, and Chaplain):
Senator Murray	hereby authorize Colin Goldfinch
(Print Senator's/Officer's Name)	(Print Traveler's Name)
related expenses for travel to the event de	to accept payment or reimbursement for necessary transportation, lodging, and scribed above. I have determined that this travel is in connection with his or he older, and will not create the appearance that he or she is using public office for
of the Senate. (signify "yes" by checking box	of the employee's spouse or child is appropriate to assist in the representation
02/02/2018 (Date)	(Signature of Supervising Senator/Officer)

PAT ROBERTS, KANSAS JAMES E. RISCH, IDAHO BRIAN SCHATZ, HAWAII JEANNE SHAHEEN, NEW HAMPSHIRE

DEBORAH SUE MAYER, CHIEF COUNSEL AND STAFF DIRECTOR EMILY GERSHON, CHIEF CLERK

TELEPHONE; (202) 224-2981 FACSIMILE: (202) 224-7418 TDD: (202) 228-3762

# United States Senate

SELECT COMMITTEE ON ETHICS

February 27, 2018

Colin Goldfinch Committee on Health, Education, Labor and Pensions United States Senate Washington, DC 20510

Dear Mr. Goldfinch:

This responds to your recent correspondence concerning an invitation you received to travel to the Healthcare Information and Management Systems Society (HIMSS) Annual Conference and Exhibition, in Las Vegas, Nevada, on March 6-9, 2018, sponsored by HIMSS. HIMSS certified to the Select Committee on Ethics (the Committee) that it will pay the necessary expenses<sup>1</sup> related to the travel and that it is neither a lobbyist, nor lobbying firm, nor an agent of a foreign principal, and it is not otherwise acting as a representative or agent of a foreign government. HIMSS has also certified that it does not retain or employ a registered lobbyist or agent of a foreign principal and that no registered lobbyist will accompany you at any point throughout your trip.<sup>2</sup>

Based on information and materials available to the Committee, and assuming the actual travel and travel-related expenses conform to the information and materials you provided, it appears that the proposed payment or reimbursement of necessary expenses for this trip may be accepted under relevant Senate Rules and the Committee's Regulations and Guidelines for Privately-Sponsored Travel, so long as at the time of the payment or reimbursement, HIMSS is neither a registered lobbyist nor lobbying firm under the Lobbying Disclosure Act of 1995, nor an agent of a foreign principal under the Foreign Agents Registration Act (and is not otherwise acting as a representative or agent of a foreign government), and provided the travel and all required documents are disclosed to the Secretary of the Senate in accordance with the provisions of Senate Rules 34 and 35.

Under Senate Rule 35, Senate staff must receive advance authorization signed by the Member or officer under whose direct supervision the individual works in order to accept payment or reimbursement for necessary expenses related to fact-finding travel. Further, such authorization and expenses must be disclosed to the Secretary of the Senate by filing the completed *Employee Pre-Travel Authorization* and the *Employee Post-Travel Disclosure of* 

<sup>&</sup>lt;sup>1</sup> The term "necessary expenses" has a specific definition. See Select Committee on Ethics' Regulations and Guidelines for Privately-Sponsored Travel – Glossary of Terms at 8.

<sup>&</sup>lt;sup>2</sup> The term "any point throughout your trip" has a specific definition. See id. at 2.

Travel Expenses (Form RE-1 and Form RE-2), along with a copy of the Private Sponsor Travel Certification Form, and all relevant attachments (e.g., the private sponsor's invitation and itinerary) within 30 days of the conclusion of Privately-Sponsored Travel.

Finally, Senate Rule 34 requires a reporting individual,<sup>3</sup> on his or her Financial Disclosure Report, to make an annual disclosure of the receipt of payments or reimbursements under Senate Rule 35 from a private sponsor for officially-related travel expenses where, in the aggregate, travel expenses exceed \$390 from that sponsor during a calendar year. However, if a Member, officer, or employee properly reports the receipt of necessary expenses for such travel to the Secretary of the Senate within 30 days of the travel, as discussed above, the travel expenses need not be disclosed a second time on their Financial Disclosure Report.

I hope you find this information helpful. If you have any additional questions, please do not hesitate to contact the Committee.

Sincerely,

Deborah Sue Mayer

Chief Counsel and Staff Director

Enclosure: Travel Checklist

<sup>&</sup>lt;sup>3</sup> A reporting individual is someone whose salary equals or exceeds 120% of the basic rate of pay for GS-15 (\$126,148 for CY 2018) or is a political fund designee and is required to file Financial Disclosure Reports.

# PRIVATE SPONSOR TRAVEL CERTIFICATION FORM

This form must be completed by any private entity offering to provide travel or reimbursement for travel to Senate Members, officers, or employees (Senate Rule 35, clause 2). Each sponsor of a fact-finding trip must sign the completed form. The trip sponsor(s) must provide a copy of the completed form to each invited Senate traveler, who will then forward it to the Ethics Committee with any other required materials. The trip sponsor(s) should NOT submit the form directly to the Ethics Committee. Please consult the accompanying instructions for more detailed definitions and other key information.

The Senate Member, officer, or employee MUST also provide a copy of this form, along with the appropriate travel authorization and reimbursement form, to the Office of Public Records (OPR), Room 232 of the Hart Building, within thirty (30) days after the travel is completed.

Sp	onsor(s) of the trip (please list all sponsors):
He	ealthcare Information and Management Systems Society (HIMSS)
De	scription of the trip: This is an educational experience to attend the HIMSS18 Annual Conference and
Ex	hibition for education, innovation and collaboration on health information and technology.
Da	tes of travel: March 6 - 9, 2018
Pla	ce of travel: Las Vegas, NV
Na	me and title of Senate invitees: Please see attached list of Senate invitee
	ertify that the trip fits one of the following categories:
	(A) The sponsor(s) are not registered lobbyists or agents of a foreign principal <u>and</u> do not retain or employ registered lobbyists or agents of a foreign principal <u>and</u> no lobbyist or agents of a foreign principal will accompany the Member, officer, or employee at any point throughout the trip.  - OR -
	(B) The sponsor or sponsors are not registered lobbyists or agents of a foreign principal, but retain or employ one or more registered lobbyists or agents of a foreign principal and the trip meets the requirements of Senate Rule 35.2(a)(2)(A)(i) or (ii) (see question 9).
X	I certify that the trip will not be financed in any part by a registered lobbyist or agent of a foreign principal.
	-AND-
	I certify that the sponsor or sponsors will not accept funds or in-kind contributions earmarked directly or indirectly for the purpose of financing this specific trip from a registered lobbyist or agent of a foreign principal or from a private entity that retains or employs one or more registered lobbyists or agents of a foreign principal.
	rtify that:
X)	The trip will not in any part be planned, organized, requested, or arranged by a registered lobbyist or agent of a foreign principal except for de minimis lobbyist involvement.  - AND -
X	The traveler will not be accompanied on the trip by a registered lobbyist or agent of a foreign principal except as provided for by Committee regulations relating to lobbyist accompaniment (see question 9).

	USE ONLY IF YOU CHECKED QUESTION 6(B)
	I certify that if the sponsor or sponsors retain or employ one or more registered loody is a definition of a
	foreign principal, one of the following scenarios applies:
	(A) The trip is for attendance or participation in a one-day event (exclusive of travel time and one overnight stay) and no registered lobbyists or agents of a foreign principal will accompany the Member, officer, or employee on any segment of the trip.  — OR —
	<ul> <li>□ (B) The trip is for attendance or participation in a one-day event (exclusive of travel time and two overnight stays) and no registered lobbyists or agents of a foreign principal will accompany the Member, officer, or employee on any segment of the trip (see questions 6 and 10).</li> <li>— OR —</li> </ul>
	(C) The trip is being sponsored only by an organization or organizations designated under § 501(c)(3) of the Internal Revenue Code of 1986 and no registered lobbyists or agents of a foreign principal will accompany the Member, officer, or employee at any point throughout the trip.
	USE ONLY IF YOU CHECKED QUESTION 9(B)  If the trip includes two overnight stays, please explain why the second night is practically required for Senate invitees to participate in the travel:
	Contraction is attached to this form. I certify that the attached itinerary is a detailed (hour-
•	An itinerary for the trip is attached to this form. I certify that the attached itinerary is a detailed (hourby-hour), complete, and final itinerary for the trip.
•	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:
	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:
	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest
	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest
	Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest healthcare conference, bringing together thought leaders from across the healthcare community, including providers, IT experts, vendors, and local, federal and state government representatives.
	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest healthcare conference, bringing together thought leaders from across the healthcare community, including providers, IT experts, vendors, and local, federal and state government representatives.  Briefly describe the stated mission of each sponsor and how the purpose of the trip relates to that mission:
	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest healthcare conference, bringing together thought leaders from across the healthcare community, including providers, IT experts, vendors, and local, federal and state government representatives.  Briefly describe the stated mission of each sponsor and how the purpose of the trip relates to that mission: HIMSS is a global, caused-based not-for-profit focused on transforming health through information and
	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest healthcare conference, bringing together thought leaders from across the healthcare community, including providers, IT experts, vendors, and local, federal and state government representatives.  Briefly describe the stated mission of each sponsor and how the purpose of the trip relates to that mission: HIMSS is a global, caused-based not-for-profit focused on transforming health through information and technology. HIMSS provides thought leadership, community building, and professional development, and
	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest healthcare conference, bringing together thought leaders from across the healthcare community, including providers, IT experts, vendors, and local, federal and state government representatives.  Briefly describe the stated mission of each sponsor and how the purpose of the trip relates to that mission: HIMSS is a global, caused-based not-for-profit focused on transforming health through information and technology. HIMSS provides thought leadership, community building, and professional development, and leads efforts to optimize health engagements and care outcomes using information and technology.
	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest healthcare conference, bringing together thought leaders from across the healthcare community, including providers, IT experts, vendors, and local, federal and state government representatives.  Briefly describe the stated mission of each sponsor and how the purpose of the trip relates to that mission: HIMSS is a global, caused-based not-for-profit focused on transforming health through information and technology. HIMSS provides thought leadership, community building, and professional development, and leads efforts to optimize health engagements and care outcomes using information and technology.  Briefly describe each sponsor's prior history of sponsoring congressional trips:
3.	by-hour), complete, and final itinerary for the trip.  Briefly describe the role of each sponsor in organizing and conducting the trip:  HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS18 is the largest healthcare conference, bringing together thought leaders from across the healthcare community, including providers, IT experts, vendors, and local, federal and state government representatives.  Briefly describe the stated mission of each sponsor and how the purpose of the trip relates to that mission: HIMSS is a global, caused-based not-for-profit focused on transforming health through information and technology. HIMSS provides thought leadership, community building, and professional development, and leads efforts to optimize health engagements and care outcomes using information and technology.

- 1 1 1 N/4 C C	Briefly describe the educational activities performed by each sponsor (other than sponsoring congression trips):  HIMSS hosts educational briefings and roundtables with federal and state officials, and health IT experts					
<del></del>	ealth policy issues. The	· · · · · · · · · · · · · · · · · · ·				
country.						
Total Expenses for Ea	ch Participant:					
	Transportation  Expenses	Lodging Expenses	Meal Expenses	Other		
Good Faith estimate  Actual Amounts	\$350	\$447	\$185  (Some meals covered in conference registration fee; no alcohol will be provided to Senate staffers)	\$795 (gov't raconference registration for waived) \$350 (pre-consymposia ference) \$45 (Women Health IT)		
congreccional narticin				vith regard to		
The trip is organized v	without regard to congre	essional participation		,		
The trip is organized v						
The trip is organized version of the trip is organized version.  Reason for selecting the selecting the selecting the selecting the selecting the selecting the selection.	without regard to congre	or trip		,		
The trip is organized version of the trip is organized version.  Reason for selecting the selecting	he location of the event	or trip				
Reason for selecting the HIMSS Annual Confector can accommodate a commodate and location of	he location of the event	or trip over 45,000 attendees	s and rotates among			
Reason for selecting the HIMSS Annual Confectant accommodate a confectant and location of The Palazzo Hotel, 33 Reason(s) for selecting	he location of the event rence brings together of conference of our size.  hotel or other lodging to 325 S Las Vegas Blvd,	facility:  facility:  facility:  facility:	s and rotates among	the few cities that		
Reason for selecting the HIMSS Annual Confectant accommodate a confectant and location of The Palazzo Hotel, 33  Reason(s) for selecting HIMSS seeks bids from	he location of the event rence brings together conference of our size.  hotel or other lodging to the size of the	facility:  Journal of the second of the seco	s and rotates among	the few cities that		

21.	Describe how the daily expenses for lodging, meals, and other expenses provided to trip participants compares to the maximum per diem rates for official Federal Government travel:
	The lodging rate is slightly higher than the per diem rate (by \$15 per night), and the meals rate is
	comparable. This event is organized without regard to congressional participation and hotel is selected
	for reasons listed in question 20.
22.	Describe the type and class of transportation being provided. Indicate whether coach, business-class or first class transportation will be provided. If first-class fare is being provided, please explain why first-class travel is necessary:
	Coach air and ground transportation.
23.	I represent that the travel expenses that will be paid for or reimbursed to Senate invitees do not include expenditures for recreational activities, alcohol, or entertainment (other than entertainment provided to all attendees as an integral part of the event, as permissible under Senate Rule 35).
24.	List any entertainment that will be provided to, paid for, or reimbursed to Senate invitees and explain why the entertainment is an integral part of the event:
	None provided
25.	I hereby certify that the information contained herein is true, complete and correct. (For trips involving more than one sponsor, you mu  1 signature page for each additional sponsor):  Signature of Travel Sponsor:
	Name and Title: Carla Smith
	Name of Organization: HIMSS
	Address: 33 West Monroe, Suite 1700, Chicago, IL 60603
	Telephone Number:
	Fax Number:
	E-mail Address: csmith@himss.org

#### **Additional Information**

### Question 5. U.S. Senate Invitees:

- Brett Baker (Senate Finance Committee)
- Morgan Brand (Sen. Schumer)
- Andrew Burnett, Health Research and Policy Assistant (Senate HELP Committee)
- Jennifer DeAngelis (Sen. Whitehouse)
- Eric Dempsey (Senate Finance Committee)
- Will Dent (Sen. Isakson)
- Marvin Figueroa (Sen. Warner)
- Victoria Flood (Sen. Capito)
- Julia Frederick (Sen. Warren)
- Matt Gallivan (Sen. Cassidy)
- Colin Goldfinch, Senior Health Policy Adviser (Senate HELP Committee)
- Jordan Grossman (Sen. Klobuchar)
- Rita Habib (Sen. Bennett)
- Samantha Helton (Sen. Wicker)
- Elizabeth Henry, Legislative Assistant (Sen. Cochran)
- Virginia Heppner, Professional Staff Member (Senate HELP Committee)
- Will Holloway, Legislative Assistant (Sen. Hatch)
- Danielle Janowski (Sen. Thune)
- Lauren Jee (Sen. Cardin)
- Elizabeth Joseph (Sen. Cochran)
- Adam Lachman (Sen. King)
- Kathleen Laird (Sen. Baldwin)
- Aisling McDonough, Health Legislative Assistant (Sen. Schatz)
- Bobby McMillin, General Counsel (Senate HELP Committee)
- Brett Meeks, Health Counsel (Senate HELP Committee)
- Madeleine Pannell (Senate HELP Committee)
- Lauren Paulos (Sen. Hatch)
- Stuart Portman, Health Policy Adviser (Senate Finance Committee)
- Lorenzo Rubalcava (Sen. Stabenow)
- Kristi Thompson (Senate HELP Committee)
- Beth Vrabel (Senate Finance Committee)
- Arielle Woronoff, Senior Health Counsel (Senate Finance Committee)

Question 23. Note: No alcohol will be provided or served to Senate staffers, as noted on the agenda.



#### Congressional Staff Agenda

Location: Sands Expo Center, Las Vegas, NV March 5 – 9, 2018

Access Full Conference Information here: <u>HIMSS18</u>
<u>All activities are at Sands Expo Center unless otherwise noted.</u>
<u>All times are Eastern Time (EST).</u>

\*\*Note: All events and receptions listed on this agenda are open to all conference attendees\*\*

Tuesday, March 6th, 2018

1 uesaay, Iviar 11:10am Flight a	arrives in Las Vegas
9:30 AM - 6:00 PM	HIMSS18 Exhibition Hall with live technology demonstrations, presentations, and sessions
(When not attending concurrent educational sessions or for non-scheduled time)	<u>Description:</u> Learn about cutting edge health information technology. Experience thousands of health IT products and services on the HIMSS18 exhibit floor. Features the Meaningful Use Experience — a special live demonstration area that lets the viewer experience proven, certified EHR solutions. Also experience firsthand the Social Media Center, HIMSS Interoperability Showcase, The Intelligent Hospital Pavilion and more.
9:30 AM - 6:00	Interoperability Showcase
(When not attending concurrent educational sessions or for non-scheduled time)	<u>Description:</u> Explore a health ecosystem where standards-based health IT enables individuals to securely access, contribute to and analyze their own health data. Learn how current health IT products in the market deliver standards-based interoperability and health information exchange with an interactive learning experience.
11:30 - 12:30	Concurrent Education Sessions:
PM	Centers for Medicare & Medicaid Services (CMS) Session The Centers for Medicare & Medicaid Services (CMS) will be presenting on several critical topics in their sessions, including: the agency's quality and innovation work related to its health IT-related Medicare payment policies, including the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), Quality Payment Program (QPP), and the Medicaid funding opportunities that exist for providers as well as states in terms of interoperability and Medicaid modernization and modularization.
	OR
	The Impact of Smartphone Technology in Clinical Practice This session will discuss study findings and demonstrate how implementing a smartphone solution into clinical practice significantly improved physician response times, increased efficiency and transformed care team communication.
	OR

## Virtual Reality Gets Real in Healthcare

Recent, real-world case studies in virtual reality (VR) hold promise for medical training as well as operational support. Organizations like the US Army, VA, medical schools, and private hospital systems are exploring new uses. VR is an umbrella term for other areas including augmented reality ("AR") and 3-D. VR and AR technology have advanced to the point where consumer facing immersive VR experiences are accessible at reasonable price points. So far, VR has gotten traction in healthcare mainly as a training and education device, but industry-wide it's a green field for innovation. We've only scratched the surface of VR's potential to disrupt healthcare delivery. New revenue, cost savings and quality gains can be captured from VR across multiple verticals-health system, provider, pharma, payer and consumer. VR can leverage techniques to weave itself into the fabric of healthcare deliverygamification, social media, narrative, visioning, goal setting and rewards.

#### **OR**

# Engaging and Empowering Patients: Redesigning Patient Care

This session will discuss how we transformed care coordination and the patient experience in our Maryland-based health system by implementing a patient engagement and care coordination platform supported by a fully enabled virtual care team. The program streamlined communication, collaboration and coordination among hospitalists, specialists and PCP's and implemented a well-defined patient engagement strategy. By sharing actionable health information, providing 24/7 access to virtual care teams and managing transitions of care, we achieved a 350% reduction in in-patient transfers, 100% completion of discharge follow ups within 48 hours, more than 50% reduction in readmission and 15% reduction in no-shows. Feedback indicates a vastly enhanced patient experience, improved quality of care and better outcomes. We will also discuss how remote patient monitoring using intelligent medical devices demonstrates significant potential to further these goals.

#### 12:00 – 1:00 PM | Federal Health Community Lunch

Description: A community of HIMSS members and Federal Government employees, coming together for cross-agency information sharing and networking, and to share new ideas on how health IT can be used to improve healthcare delivery by the federal government.

#### 1:00 - 2:00 PM

## **Concurrent Education Sessions:**

## **Human Factors and Workforce Solutions to Connected Care**

The speakers will examine the enablers of, and barriers to, maximizing health IT work force and human factors in achieving progress as the nation moves toward a more distributed healthcare system by 2025. The speakers will provide an update on cross- sectoral discussions held as part of NEHI's "Healthcare Without Walls" project to identify work force and human factor challenges resulting from increased availability and utilization of digital health, telehealth, remote monitoring, artificial intelligence, and cognitive computing technologies. The speakers will also engage the participants in a discussion around possible solutions, model best practices and tools to address the challenges to enable future progress today.

#### OR

## Closing the Gap: Risk Insights at the Point of Care

Steward Health Care Network is an accountable care organization with 3,500 physicians, 18 hospital campuses, and 25 affiliated urgent care provider

locations. Headquartered in Boston, Steward is community-based and physician-led with more than 23,000 employees across four states. With their participation in the Next Generation ACO program, the MassHealth Medicaid ACO and a growing Medicare Advantage footprint, Steward needs to accurately understand patient risk to develop appropriate care programs and ensure appropriate reimbursement to fund those programs. As documentation requirements for continually increase, Steward's investment in a centralized data infrastructure supported a significant financial return and now helps alleviate provider frustration stemming from having to manage patient details in multiple technology platforms. By pushing HCC coding gaps directly to the EHR for provider review, Steward has entered the next phase of a successful risk program.

#### **OR**

Safer Transition from the ER Using Asynchronous Virtual Care
Patients leaving the ED lack available post-acute care options, including care
coordination. They're at risk to return to the hospital at significant cost,
impacting patient safety, care quality, satisfaction with service and readmissions. Emergency Medicine Consultants sought a solution to engage
with patients after discharge which would result in higher levels of patient
satisfaction, lower readmissions, and lower system leakage. EMC launched
Safe Transitions virtual care in Sept 2016. The post-ED safety program
leverages text-first telemedicine to offer no barrier, physician access for
patient continuity of care inquiries and ongoing treatment. Broadening the
traditional ED visit into a patient-centric, acute care episode improves
reliability and builds loyalty between patient and system. This session will
describe service adoption and care metrics for this unique post-acute ED
telehealth application, as well as future service line plans.

#### OR

#### Sutter Health: A Health Data Sharing Case Study

Whether they have sought treatment across the street or across the country, they expect their health data to be available to their physicians and themselves. Sutter Health, a non-profit health system in California, is pioneering health data sharing by leveraging national-level interoperability initiatives like Carequality. They will share best practices in implementing the leading interoperability framework and other health data sharing initiatives, and insights for the future of health data sharing among and between providers, payers, and patients.

#### 2:30 - 3:30 PM

#### **Concurrent Education Sessions:**

## Optimizing EHR Governance to Improve the User Experience

After the go live is over, the work of EHR optimization begins. In 2014, Dignity Health initiated a standardized approach to EHR governance with the goal of optimizing the User Experience. The results have been phenomenal. Increased throughput, decreased turn-around-time along with greater provider engagement and satisfaction. This session will share processes and key lessons learned.

#### **OR**

## Inappropriate Opioids, Adverse Outcomes and IT Solutions

Little information exists on the appropriateness of opioid prescriptions and how opioid prescribing practices influence health outcomes and medical costs. Using a nationwide database, we linked pharmaceutical and

inpatient/outpatient records for individuals with a medical disability due to carpal tunnel release surgery. We found that 29% of cases were prescribed opioids contrary to evidence-based guideline recommendations. Further, patients prescribed an opioid contrary to guidelines had disability durations 2 days longer and medical costs \$422 higher than patients prescribed an opioid according to guidelines. Inappropriate opioid prescriptions for carpal tunnel release may cost the U.S. \$71 million in medical costs and 124,000 disability days. IT solutions are available to prevent inappropriate prescriptions including drug formularies. This session will discuss the integration of opioid guidelines and a drug formulary within Kaiser Permanente's EHR including physician perspectives of the tool.

#### OR

#### Creating a Population Health Strategy that Scales

Attendees will learn how UMass Memorial collects data from diverse sources, integrates it, then analyzes it to create a clear picture of population health needs and value-based care performance. They will also learn how UMass Memorial's office of clinical integration managed the cultural change necessary to move from fee-for-service medicine to value-based care.

4:00 - 5:00 PM

**Concurrent Education Sessions:** 

### Behavioral Health: A Launchpad for Enterprise Telehealth

As telemedicine continues to change how providers interact with their patients, organizations are expanding already existing telehealth programs or are investing in telehealth technology. Introducing Behavioral Health services via telemedicine can have an immediate impact on a wellbeing of the patient population. Focusing on one service line, Behavioral Health, this session will walk through how Mass General Hospital (MGH) has successfully implemented and continues to grow their telehealth program - beginning with building a strategy through to growing the patient population. Due to the everchanging regulatory telemedicine landscape, a special focus will be placed on the necessary legal considerations when developing a program. Presenters will also touch on a recent expansion of the program to reach island residents and a tourist population off the coast of Massachusetts as well as the new NQF guidelines and how MGH has embarked on implementing the new measures.

#### **OR**

#### Using Simulation Training to Speed EHR Adoption

Successful EHR implementation hinges on several factors with user training in the top rank. Classroom training, while standard, is perceived as high cost and low value by many medical professionals. While time in the classroom is a component of an overall learning strategy, simulation training is playing an increasing role in higher medical education. MD Anderson, faced with a single go-live to launch our EHR, used simulation training to augment classroom work. We created a simulation environment for our physician faculty, advanced practice providers and fellows. We used simulation to augment classroom instruction for over 2000 providers. This approach was well accepted by our faculty and in post go-live evaluation was seen as an extremely valuable experience. This session will include specific examples of the how this training platform can be used at scale to deliver an enhanced training experience and actionable insight into provider preparation.

**OR** 

Five Pillars of a Best-In-Class Cybersecurity Program

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	This session will detail the five vital pillars of building and running an effective cybersecurity program, touching on key best practices undertaking this implementation, barriers you may encounter and how to overcome them, and expected successes. This speaker's expertise combined with more than 25 years of experience will guide audience members from all companies — whether big or small — on the best way to develop and implement a cost-
4.00 5.00 5.14	effective, fully functional and adaptable security program.
4:00 - 5:00 PM	Views from the Top – Leveraging Information and Technology to Minimize Health's Economic Challenges with HIMSS CEO Hal Wolf
	Description: Economic pressures and demands on the healthcare industry
	are poised to intensify in the coming decade. The impending silver tsunami partnered with a shrinking economic base are challenging hospitals and
	providers to continue to deliver services while maintaining quality of care. In
	facing this full-fledged economic emergency, the health community needs to
	decide quickly where and how to innovate, invest and implement impactful
	technologies. Hal Wolf III, President and CEO of HIMSS, will discuss how
	organizations can leverage the value of HIMSS to address the information
	and technologies needed to face the next decade of economic uncertainty.
	Attendees will have the ability to participate in a Q&A session at the end of the session.
4:00 - 5:00 PM	Congressional Forum
	Description: The Congressional Forum session provides the opportunity to
	hear from key Senate and House of Representatives staffers about the health
	IT public policy topics that they are addressing as well as the issues where
	they seek more information and input from constituents.
5:30 - 6:30 PM	HIMSS Communities Carnival
	HIMSS membership include a broad range of professional roles. Take this in-
	person opportunity to build your peer network, and mingle with volunteers and
	leaders from HIMSS communities, chapters, committees, task forces, career
	development, and more.
	Dinner on your own

Wednesday, March 7th, 2018

7:00 – 8:15 AM	HIMSS Public Policy Leaders Breakfast
	<u>Description:</u> Breakfast with HIMSS public policy leaders, winners of the HIMSS Nichols E. Davies Award for Excellence in Health Information Technology, and the HIMSS Public Policy Committee.
8:30 — 9:30 AM	State Officials Panel: Health IT Across the States
	<u>Description:</u> State Officials Panel: Health IT Across the States, where state officials will discuss critical health IT public policy topics and how states have attempted to address them with the help of federal agencies, partner organizations, and in collaboration with other states. This session will provide a compelling discussion on the best practices and lessons learned from state action on key health IT policy issues.
8:30 — 9:30 AM	Views from the Top – Inspiring Digital Health innovation: Transformative Insights from Across the Globe
	<u>Description:</u> Embracing strategies that drive innovation across the healthcare continuum are critical to improving the efficiency and effectiveness of the patient care experience. For those digital health ecosystems that do embrace change through innovation, their healthcare executives recognize that business drivers like

- '	:30 AM – 6:00 M	quality, cost, and safety are enhanced through disruptive technologies such as artificial intelligence, machine learning, and virtual reality. From this esteemed panel of internationally-recognized experts, attendees will gain insights into the knowledge, the experiences, and the deep learnings that are so critical to driving change. With a focus on the challenges and the opportunities experienced across the people, the processes, and the technologies, panelists will identify those elements that are so critical to establishing and nurturing a culture of innovation.  HIMSS18 Exhibition Hall with live technology demonstrations, presentations, and sessions
at co ec se	When not tending oncurrent ducational essions or for on-scheduled me)	<u>Description:</u> Learn about cutting edge health information technology. Experience thousands of health IT products and services on the HIMSS18 exhibit floor. Features the Meaningful Use Experience — a special live demonstration area that lets the viewer experience proven, certified EHR solutions. Also experience firsthand the Social Media Center, HIMSS Interoperability Showcase, The Intelligent Hospital Pavilion and much more.
-	:30 AM - 6:00	Interoperability Showcase
(Value se n	M When not tending oncurrent ducational essions or for on-scheduled me)	<u>Description:</u> Explore a health ecosystem where standards-based health IT enables individuals to securely access, contribute to and analyze their own health data. Learn how current health IT products in the market deliver standards-based interoperability and health information exchange with an interactive learning experience.
	0:00 – 11:00 AM	Concurrent Education Sessions:
		Applying Pop Health to Benefit the Mississippi Delta Region The Mississippi Delta Medicaid Population Health Project was launched to drive targeted community, patient and medical provider interventions using modern Population Health Management solutions. The project has two overarching goals:  1) Reduce the rate of preterm births by 5%; 2) Reduce the progression of prediabetes to diabetes by 5%. Delta Health Alliance (DHA) in coordination with the Mississippi Division of Medicaid has been able to combine its electronic health record system with claims data from the State MMIS system. This data has been organized in dynamic registries that Medicaid providers have access to, at the point of care, to identify, score and predict the risks for diabetes progression or preterm birth. Phase 1 of the project is focused in a 5-county region throughout the Delta including: Coahoma, Holmes, Leflore, Sunflower and Washington counties. The study is expanding to a 10-county region in Phase 2. Prediabetes Phase 1 results will be complete by August 2017.
		OR
		Beyond the EHR: Continuous Innovation for the Transition to Value-Based Care  Many healthcare organizations have thought or planned for the transition to value-based care, however most are in the early stages. Learn about how Providence St. Joseph Health has built a strategic roadmap and created practical use cases to get ahead of the shift. This organization has been proactively building the tools and processes to optimize workflow and improve patient outcomes, which includes the development of leading performance indicators as well as use cases to support workflows within a Clinically Integrated Network.
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	Is Blockchain Right for Good Health?  A great deal of hype has been generated about blockchain's capability of redefining the future of enterprises by solving legacy problems that have impeded optimization and innovation. After the blockchain tsunami in the financial sector, the U.S. healthcare system became prime target number two. This session will cover the advancement of blockchain adoption within the healthcare system, progress on certain applications (health record, medical interoperability), and rapidly emerging areas of need (i.e. data breaches, medical device vulnerability).
11:00 - 12:00 AM	Staff Led VIP Tour of the Interoperability Showcase
11:30 AM – 12:30 PM	Concurrent Education Sessions:
	Risk Management Framework for DoD Medical Devices This session will describe the DoD Risk Management Framework (RMF) requirements, workflows and the Defense Health Agency's role in RMF for medical devices.
	OR
	Patients as Partners: Embracing Patient-Driven Design and Innovation Participatory design approaches, such as "design thinking" and "maker movement", involving both patients and caregivers have the potential to create innovative and disruptive health solutions that improve care experiences for everyone. In this high-impact session featuring 3 "ignite talks", design experts will showcase how we can move health care forward in the continuum of design to complement the three concurrent strands fueling the surge of participatory and DIY mentality today: "I want to do it," "I can do it," and "let's do it together".
	OR
	Embracing Longitudinal Person-Centered Care Plans This session will introduce the concept of longitudinal person-centered care plan and describe current Federal and State regulatory levers in place to support the standardized, electronic capture, exchange and sharing of person-centered plans across multi-disciplinary settings to include home and community-based settings (HCBS). This session will describe key financial levers such as the CMS Chronic Care Management Codes, CMS Comprehensive Primary Care Plus Payment Model and CMS HCBS Waiver Program, and technical levers such as the ONC 2015 Edition Care Plan Criterion.
1:00 - 2:00 PM	Federal Health Community Lunch
	Description: A community of HIMSS members and Federal Government employees, coming together for cross-agency information sharing and networking, and to share new ideas on how health IT can be used to improve healthcare delivery by the federal government.
1:00 - 2:00 PM	Concurrent Education Sessions:
	Connected Care: VA, Virtual Health, and the Patient Experience This session focuses on the next phase of VA's digital transformation —the integration of mobile, telehealth and electronic health record (EHR) tools to provide a seamless experience of care delivery that gives Veterans and care teams a cohesive system to access, manage and track health holistically over time.
	OR
	Digital Transformation Across the Healthcare Ecosystem

Learn industry perspectives to address strategies and best practices for navigating this shift across an organization including leadership, business operations, patient engagement strategies and technological advancements. Realize the value proposition for evolving your organization alongside the pace of today's technological disruption.

#### OR

#### Shared Governance and Analytics Framework Improves Quality

In this session, MultiCare will illustrate how a shared governance arrangement built a strategic framework for the use of analytics to deliver not only broader quality outcomes, but also service excellence and affordable care.

#### 2:30 - 3:30 PM

#### **Concurrent Education Sessions:**

### Putting Patients First by Reducing Administrative Tasks

This session will assess the effects on administrative tasks on physician time, practice and system cost, and patient care due to the increase in administrative tasks, and then to identify recommendations to modify, mitigate, reduce, or eliminate these tasks as appropriate

#### OR

## One Size Doesn't Fit All: Local Public Health Informatics Perspectives

This session will give an overview of both surveys as well as provide a basic tutorial about public health and local health departments. Issues related to overall informatics capacity of local health departments and the gaps that need to be addressed in the current climate which includes budget cuts, workforce challenges, as well as the implications of national policy efforts.

#### OR

#### Building a Population Health Strategy that Physicians Love

This educational session describes best practices and lessons learned by Alliance Cancer Specialists and Shore Quality Partners in their multi-year population health management journey. The speakers share best practices and lessons learned across their physician-led organizations to create a new culture and network initiatives embraced by both providers and practice stakeholders. Once physicians comprehend data's value in transforming patient care, they feel empowered and become strong advocates; they are more motivated to provide customized care, reduce variability and improve outcomes.

### 4:00 - 5:00 PM

### **Concurrent Education Sessions:**

#### The Power of Health IT - Predict, Prevent, Innovate

In this session, speakers will review common mistakes to avoid, scenarios to consider and how the secure, connected hospital can enhance the patient, clinician, and operational experience.

#### **OR**

#### Improving Quality of Care in Anesthesiology

We will discuss the key organizational and technological challenges encountered, and how these challenges were addressed to ensure that NACOR is accessible to anesthesiology groups of all sizes, including small groups with limited IT support and groups that practice in multiple hospitals with multiple EMR vendors. Addressing these challenges has required taking innovative approaches to health data integration and a relentless focus on attaining scalability in business and

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	technical operations. Today, NACOR provides a robust clinical data set that is being used to improve outcomes in anesthesiology.
	OR
	The Cloud Through the Eyes of a Community Health Center CIO This session is geared to providing the answers these hospitals seek. Presented by a healthcare CIO with extensive experience managing IT for community hospitals and medical groups, this session will outline the unique challenges—and unexpected opportunities—smaller organizations will encounter by moving their core applications and protected health information to a secure, HIPAA-compliant cloud.
5:15 – 6:15 PM	Federal Health Community Reception
	Description: Networking event for the Federal Health Community, a community of HIMSS members and Federal Government employees.  **No alcohol will be provided or served to Senate staff**
6:30 - 8:00 PM	HIMSS18 Women in Health IT Reception
	Location: TBD
	Description: Be a part of the industry's most powerful gathering of women innovators, leaders and entrepreneurs shaping and transforming health through technology today. Share stories, recognize and celebrate your peers – form valuable connections that will last a lifetime.  **No alcohol will be provided or served to Senate staff**
	Dinner on your own

Thursday, March 8<sup>th</sup>, 2018
8:30 – 9:30 AM Concurrent Education Sessions:

Designing from the Inside Out: Taking a Strategic Approach This session will provide details on how Northwell successfully developed a strategy and internal program for the responsible use of telehealth across its 18 hospitals in New York. The goal of this session is to prepare attendees to assess their readiness for a system-wide telehealth program, and begin putting the pieces in place to develop their own strategic and long-range plans.
OR
Integrating Evidence-Based Decision Tools within an EHR This session will describe the process of picking and deploying CDS tools incorporating evidence-based guidelines within a large-scale, EHR system. Physician perspectives and usage of the CDS tool will be discussed. Finally, the speakers will present trends in quality of care metrics attributed to the adoption of CDS tools at the point of care.
OR
Standards and Interoperability – DoD/VA Health Information Exchange The Military Health System (MHS) and Veterans Health Administration (VHA) are two large health systems serving the Nation's military veterans. As veterans move between the MHS and VHA, the availability of treatment information from all sources of care is critical for delivery of safe, quality, and efficacious care. MHS and VHA have adopted Office of the National Coordinator (ONC) standards to assure interoperability and to support patient care. This session explores those

	standards and their application to facilitate health information exchange.
9:30 AM - 4:00 PM	HIMSS18 Exhibition Hall with live technology demonstrations, presentations, and sessions
(When not attending concurrent educational sessions or for non-scheduled time)	<u>Description:</u> Learn about cutting edge health information technology. Experience thousands of health IT products and services on the HIMSS18 exhibit floor. Features the Meaningful Use Experience — a special live demonstration area that lets the viewer experience proven, certified EHR solutions. Also experience firsthand the Social Media Center, HIMSS Interoperability Showcase, The Intelligent Hospital Pavilion and much more.
9:30 AM - 4:00 PM	Interoperability Showcase
(When not attending concurrent educational sessions or for non-scheduled time)	<u>Description:</u> Explore a health ecosystem where standards-based health IT enables individuals to securely access, contribute to and analyze their own health data. Learn how current health IT products in the market deliver standards-based interoperability and health information exchange with an interactive learning experience.
10:00 – 11:00 AM	Views from the Top – Caring for Astronauts in Space: The Role of Telemedicine at NASA
	Description: Several times a year, a new team of astronauts is launched to the International Space Station, where they stay for six months to one year, performing engineering tasks, research, maintenance and upgrades. During this time, access to medical care is crucial, as altered routines and microgravity have deconditioning effects on crew members' bone and muscle, fluid distribution and immune function. Examine NASA's current use of telemedicine in the care of astronauts in orbit, and learn about opportunities being considered for future exploration class missions.
10:00 — 11:00AM	Concurrent Education Sessions:
	Standardizing Clinical Communications Improves Patient Care This session will describe the physician-led journey, addressing unique challenges such as postoperative patient care's extraordinary volume of conversations traversing multiple units. Above all, HSS desired to create a higher level of patient safety for postoperative patients from falling victim to pathway deviations.
	OR
	Identity and Access Management Challenges in Academic Medicine In this session, we will discuss identity and access management risks and challenges at academic medical centers, like the Mayo Clinic, along with practical approaches to address some key risks and challenges.
	OR
	How IT Leaders Can Reduce Reporting Burden, Boost Incentives This session provides a framework and actionable insights to operationalize an IT-driven quality reporting strategy. The speakers will facilitate a discussion about successful strategies to reduce reporting burden and maximize CMS incentives. This would include a focus on the need for collaborate and cooperation among all disciplines within the organization (Finance, IT and Clinical Operations). It would

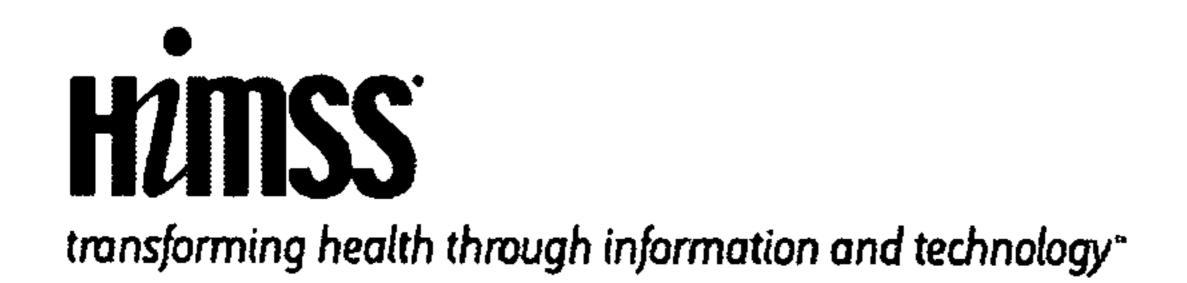
	also incorporate a collaborative strategy approach among internal and external stakeholders across the continuum of healthcare providers (hospitals, practices, PAC providers etc.).
11:30 AM – 12:30 PM	Concurrent Education Sessions:
IZ.JU PIVI	Creating a Culture of Innovation: Best Practices from the Battlefields Of all challenges in the pursuit of a better tomorrow, getting the "culture of innovation" right may be the most rewarding of them all. We have all heard the Peter Drucker quote that "culture eats strategy for breakfast", but how does an organization effectively foster a productive culture of innovation? Although there is not a one size fits all approach to innovation, there are best practices out there, and blueprints that we can use today to build off of. This session harnesses the tremendous discussions online via a HIMSS social media campaign around the theme of the culture of innovation, and distills these down to key tenets and learnings.
	OR
	Standardizing Collection of Social Determinants Data This session will discuss how data on patient social risk is foundational for driving delivery system and payment reform.
	OR
	Innovative Use of Technology in the Home: A Davies Story  On the continuum of care, treatment does end with a hospitalization or an office visit. In this session, HIMSS Davies Award winner Parkland Hospital (Dallas, TX) will share how technology is used to facilitate the administration of outpatient parenteral antimicrobial therapy. This technology-enabled process produced a 47% lower readmission rate, saved 27,666 patient days in the hospital, and saved \$40,000,000 for Parkland. Also in this session, Davies Award winner Lana'i Community Health Center (Lana'i City, HI), will demonstrate how remote blood pressure monitoring is a more effective method for diagnosing hypertension and enables improved hypertension control for the residents of Lana'i.
1:00 - 2:00 PM	Concurrent Education Sessions:
	Use of Real-Time Best Practice Alerts to Confirm Treatments This session describes a process for automatically creating real-time, patient- specific BPAs based on information contained in an electronic consent form.  Examples cited will include reviewing the chemotherapy agents listed on the consent form and automatically generating a BPA if an order is entered for an agent that does not match those on the consent. Recommendations for organizations that plan to implement real-time, patient-specific BPAs will be presented.
	OR
	CDS in the Cloud: Deploying a CDC Guideline for National Use This session will show the ability to deliver clinical decision support at scale – to numerous web service endpoints, and via SMART on FHIR applications. For this demonstration, we will describe how complex clinical logic is abstracted from a clinical guideline and represented in CQL as a component of a knowledge framework. The demonstration shows the feasibility and value of employing collaborative web-services and standards-based APIs providing clinical decision support in the form of externalized knowledge-based web services. A clinical scenario will be presented showing the system in use for an outpatient encounter. A brief description of the authoring tools used will be given. Attention will be

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	drawn to the current state of the art, and suggestions offered for future standards harmonization and vendor support for standards-based APIs.
	OR
	Improving RRID Security in a Healthcare Environment  This session will discuss best practices for securing systems that your organization may already own, how to implement security in your purchasing reviews, how to assess risk for RFID implementations, and what new emerging technologies provide the most promise for improving security.
2:30 - 3:30 PM	Concurrent Education Sessions:
	Pharmacogenomics within the EHR This session will review the clinical, laboratory, informatics, and policy decisions involved in implementing pharmacogenomics within an EHR.
	OR
	New Medicare Card Project  CMS will provide an update on the New Medicare Card Project. The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 mandates the removal of the Social Security Number (SSN)-based HICN from Medicare cards to address current risk of beneficiary medical identity theft. A new Medicare Beneficiary Identifier (MBI) will replace the SSN-based HICN on new Medicare cards which will be mailed to 60 million beneficiaries. This presentation will provide an update to the implementation and what stakeholders need to do to get ready.
	OR
	From Implementation to Optimization: Moving Beyond Operations This session will describe the process that our organization went through to evaluate the current governance, process and structure for supporting Clinical Applications including using an outside consultant to assist in developing appropriate KPIs and SLAs. Everything from optimizing the work intake and prioritization process to enhancing clinical partnerships will be discussed.
2:30 - 4:00 PM	Roundtable Discussion with Federal Agency Staff (CMS, ONC, DHA, among others)
	Location: TBD
4:00 - 5:00 PM	Concurrent Education Sessions:
	Incident Response Lessons from the Front Lines  This session will provide an in-depth overview of what should go in to an incident response plan, how to test it, how to educate the other members of your organization as to the importance, and most importantly, how to be prepared when an incident or breach occurs.
	OR
	Building and Maintaining a Modern Provider Directory  This session will explore the type of systems involved in this complex process, and share some of the challenges and successes Jefferson has had in pulling the data together to shield the public from these complexities. This session will include details on the development that was done by Jefferson internally to create

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	our consumer-focused solution, and what is next in our development process.
	OR
	How Analytics Can Create a Culture of Continuous Improvement This session will walk attendees through Mission's journey to instill continuous improvement through analytics, using several case studies to illustrate how improvements can be made in areas such as readmissions reduction efforts, improving sepsis, stroke, and heart failure outcomes, and scaling the preventative care needed to succeed in ambulatory population health.
5:00 - 6:00 PM	Education Social Hour
	<u>Description</u> : A social hour to meet the education session speakers "up close and personal" and network with fellow colleagues.
5:30 — 6:30 AM	Views from the Top – Boston Strong: Lessons Learned from the Boston Marathon Bombing
	Description: In an ever-changing environment, healthcare organization leaders need to be prepared to handle myriad challenges. Natural disasters like Hurricanes Harvey and Irma can present substantial problems to healthcare facilities, including infrastructure breakdown, power outages, overburdened staff and disputes over resources. Hospital leaders have also found their organizations in the middle of other challenging, often unthought-of events such as terrorist attacks, active shooter events, chemical incidents and cyberattacks, resulting in crippling information systems shutdowns. How well institutions respond is directly related to the ability of their leadership teams to think, plan, respond, adapt and lead their teams through the challenges ahead.
	Chief Daniel Linskey will take you on a leadership journey through the 2013 Boston Marathon bombing, where he was the Incident Commander, overseeing the response to the bombings and coordinating with the investigation conducted by the FBI, Boston police and state police. During the manhunt for the bombers, he managed the unprecedented lockdown of the city of Boston, was the first commander on scene during the Watertown shootout, and witnessed the emotional toll suffered by first responders and their families, including his own.
	Dinner on your own

Friday, March 9th, 2018

9:22am	Flight departs Las Vegas



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December 19, 2017

Mr. Colin Goldfinch
Senate Committee on Health, Education, Labor and Pensions
428 Dirksen Senate Office Building
Washington, DC 20510

Dear Mr. Goldfinch:

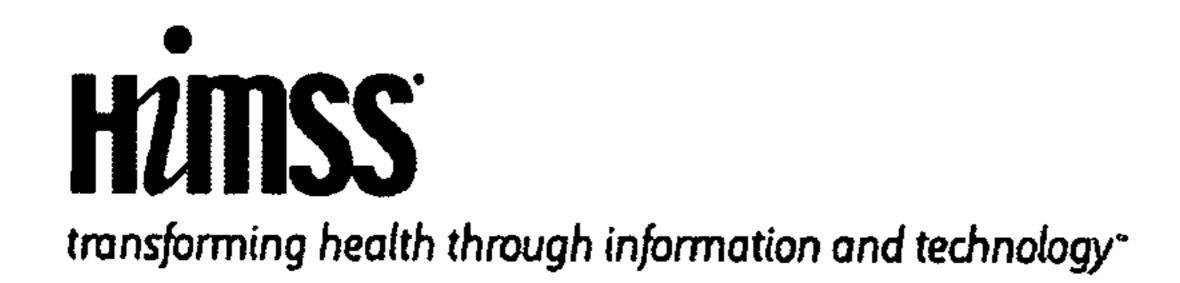
I am pleased to extend this invitation for you to attend the 2018 Healthcare Information and Management Systems Society (HIMSS) Annual Conference and Exhibition in Las Vegas, Nevada, March 5 – 8 (or March 6 - 9), 2018. This unique opportunity will allow you to learn about the potential and the challenges of healthcare information and technology—including electronic health records, health information exchange, and connected health—to help transform healthcare in America.

HIMSS is a global, cause-based, not-for-profit organization focused on transforming health through information and technology, providing thought leadership, professional development, events, market research, and media services around the world. Founded in 1961, HIMSS represents more than 70,000 individuals, plus over 640 corporations and 450 non-profit partner organizations, that share this cause. HIMSS, headquartered in Chicago, serves the global health IT community with additional offices in the United States, Europe, and Asia. To learn more about HIMSS, please visit our website at <a href="https://www.himss.org">www.himss.org</a>. HIMSS North America, a business unit within HIMSS focused on thought leadership in the United States and Canada, serves as the host to U.S. congressional staff at HIMSS professional development conferences.

The HIMSS Annual Conference and Exhibition is one of the healthcare sector's largest conferences. The 2018 HIMSS Annual Conference is anticipated to include over 300 educational events, 1,300 leading health information and technology exhibitors, and over 45,000 professionals from the U.S. and around the world. Attendees include hospital executives, physicians, physician group practice managers, nurses and other healthcare providers, federal and state agency staff, public health agency personnel, state and local government representatives, as well as technology vendors and consultants. To learn more about HIMSS18 and view a detailed conference brochure please visit <a href="https://www.himssconference.org">www.himssconference.org</a>.

During the conference, you may be especially interested in participating in a range of health IT policy events and discussions, including the HIMSS Interoperability Showcase, Cybersecurity Command Center, Connected Health Experience, Intelligent Health Pavilion, Federal Health IT Solutions Pavilion, and many other educational opportunities.





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For the last ten years, HIMSS has offered paid educational opportunities to selected policy makers to attend the HIMSS Annual Conference to learn about the public policy issues and challenges of the system-wide adoption of health information technology. Consistent with Senate and House of Representatives Ethics Rules, HIMSS is extending to you an invitation to attend HIMSS18 for up to three days (72 hours, excluding travel time). HIMSS does not employ or engage a registered lobbyist, lobbying firm, nor do we serve as a foreign agent.

Upon your acceptance of this invitation, we will provide the necessary documents to submit with your request for approval of privately sponsored travel to the Senate Select Committee on Ethics or House Committee on Ethics, as applicable. Requests must be submitted at least 30 days prior to travel (no later than February 5, 2018). HIMSS will also provide instructions to book your travel in compliance with the travel rules once approval has been obtained.

Paid opportunities to attend this unique educational event are limited, so if you will be able to attend please R.S.V.P. no later than January 12, 2018 to allow enough time for you to submit your request to your Ethics Committee at least 30 days prior to travel. Those responding will be accommodated on a first-come, first-serve basis.

If you have any questions, please feel free to contact me or David Gray at <a href="mailto:dgray@himss.org">dgray@himss.org</a> or 703-562-8817.

Sincerely,

Samantha Burch
Senior Director, Congressional Affairs
Healthcare Information and Management Systems Society
4300 Wilson Boulevard, Suite 250
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Phone: 703.562.8847;

E-mail: sbburch@himss.org